	• •		`: 	•		<u>.</u>			10	6	096	28	
	PATENT	APPLICATIO Effec	ON FEE D	RD	Application or Docket Number 0369-9016								
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			20				ſ	RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=		• /			X\$ 9=		OR	X\$18=		
INC	EPENDENT C	LAIMS	₩ minus 3 =		· /			X42=		OR	X84=	84	
MU	LTIPLE DEPE	IDENT CLAIM P	RESENT				-	+140=	· · · · ·	OR	+280=	*	
* If the difference in column 1 is less than zero, enter *0" in column 2								TOTAL	 	OR	TOTAL	<i>X</i> 3 <i>U</i>	
			IOIAL	<u> </u>	UN								
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							•	SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA	RATI	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	. 20	Minus	**		• 0	ŀſ	X\$ 9=	•	OR	X\$18≖		
AME	Independent	4	Minus	***		· 0		X42=		OR	X84=	·	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 5/23/06 (Column 1) (Column 2) (Column 3)							+140=		OR	+280=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	• 20	Minus	**	·		H	X\$ 9=		OR	X\$18=		
AME	Independent	• 4	Minus	***	•	z .		X42=	//	QR	·X84=		
	FIRST PRESE	!	.140										
:		•	٠.				L	+140=		OR	+280=	<u>-</u>	
÷.	•									OR	ADDIT. FEE		
	<u> </u>	(Column 1) CLAIMS		(Cotun		(Column 3)		····	• .	٠.			
NDMENT C		REMAINING AFTER AMENDMENT		PREVIO PAID I	ER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ğ	Total	•	Minus	**	٠.	. .		X\$ 9=		OB	X\$18=		

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

Minus.

Independent .

.* If the entry in column 1. is less than the entry in column 2, write "0" in column 3.

**If the Prighest Number Previously Paid For IN THIS SPACE is less than 3, enter "20.*

ADDIT. FEE OR ADDIT. In This Prighest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1. OR ADDIT. FEE

X42=

+140=

X84=

+280=

OR

OR

Patient and Topdomark Olice, U.S. DEPARTMENT OF COMMERCE The second second second second second

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